

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Hoosiers for Rokita, Inc.**

Full Name (Last, First, Middle Initial)

**A. Montgomery County Republican Central Committee**

Mailing Address 31 Hickory Lane

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		22		2014

City	State	Zip Code
Crawfordsville	IN	47933

Amount of Each Disbursement this Period

1000
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Purpose of Disbursement  
Non-fed political contribution

011

**Transaction ID : B-E-7640**

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. National Republican Congressional Committee**

Mailing Address 320 1st Street SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		22		2014

City	State	Zip Code
Washington	DC	20003-1838

Amount of Each Disbursement this Period

5000
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Purpose of Disbursement  
Political contribution

011

**Transaction ID : B-E-7633**

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**C. Phillips for Assessor**

Mailing Address PO Box 378

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		22		2014

City	State	Zip Code
Lafayette	IN	47902-0378

Amount of Each Disbursement this Period

2500
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Purpose of Disbursement  
Non-fed political contribution

011

**Transaction ID : B-E-7632**

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

8500.00